

12-20-99

Attorney Docket No. 5325-0161.30

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
Certification under 37 CFR §1.10 (if applicable)

EL 530 368 225 US
Express Mail Label Number

December 17, 1999
Date of Deposit

I hereby certify that this Transmittal Letter, enclosed application and any other documents referred to as enclosed herein, are being deposited in an envelope with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR §1.10 on the date indicated above and addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Matthew D. Redlon
(Print Name of Person Mailing Application)

Matthew D. Redlon
(Signature of Person Mailing Application)

Transmittal of Utility Patent Application
for Filing Under 37 CFR §1.53(b)

Box Patent Application
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is a utility patent application by inventors: Alberto A. Gabizon, Samuel Zalipsky, Dorit Goren-Rubel, and Aviva T. Horowitz, and entitled:

METHOD OF ADMINISTERING A COMPOUND TO MULTI-DRUG RESISTANT CELLS

1. Enclosed are:

- ☒ This Transmittal letter.
- ☒ One stamped, self-addressed postcard for PTO date stamp.
- ☒ Certificate of Express Mail.
- ☒ One utility patent application containing text pages 1-40 and
- ☒ 15 Sheets of drawings.
- ☒ Declaration of inventorship (unsigned)
- ☐ Sequence listing printout, diskette, and matching declaration.

2. U.S. Priority

- ☒ This application claims priority to Serial No. 60/113,004 filed December 18, 1998, now pending.
- ☒ Conditional Petition for Extension of Time: An Extension of Time is requested to provide for timely filing if required to establish copendency with the parent after all papers filed herewith have been considered.

3. Foreign Priority

- ☐ Priority of Application No. filed in on is claimed under 35 USC §119.
- ☐ A certified copy of this priority document is enclosed.

12/17/99
JC672 U.S. PTO

JC542 U.S. PTO
09/467413
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4. Fees

The filing fee has been calculated as shown below:

For:	(Col. 1)	(Col. 2)	Small Entity		or	Other Than a Small Entity	
	No. Filed	No. Extra	Rate	Fee		Rate	Fee
Basic Fee				\$380.00	or		\$760.00
Total Claims	21 - 20	1	x \$ 9 =	\$	or	1 x \$ 18 =	\$18.00
Independent Claims	4 - 3	1	x \$39 =	\$	or	1 x \$ 78 =	\$78.00
<input type="checkbox"/> Multiple Dependent Claim Presented			+ \$130 =	\$	or	+ \$260 =	\$
* If the difference in Col. 1 is less than zero, enter "0" in Col. 2.							\$856.00
			TOTAL	\$	or	TOTAL	

☒ A check for \$856.00 is enclosed to cover the Filing Fee.

Respectfully submitted,

Date: 12/17/99

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